

Meeting:	NHS Grampian Board
Meeting date:	19 March 2026
Item Number:	7
Title:	NHS Grampian 2026/27 Priorities
Responsible Executive:	Laura Skaife-Knight, Chief Executive
Report Author:	Shantini Paranjothy, Director of Public Health

1 Purpose and recommendations

This is presented to the Board for:

- Decision – To approve the strategic priorities for 2026/27
- Endorsement – To note and discuss the engagement report and proposed plan for communication and engagement of the strategic priorities.

Recommendations

The Board is asked to:

- a. **Decision** – Approve NHS Grampian’s proposed priorities for 2026/27 as set out in the public/staff facing document (Appendix 3).
- b. **Assurance** – Review and scrutinise the information provided in the paper and confirm that it provides assurance that the proposed priorities for NHS Grampian for 2026/27 are in line with national policy and emerging Sub National arrangements and Scottish Government priorities set out for the year ahead which were communicated to Health Boards in February 2026 (Appendix 1).
- c. **Endorsement** – Endorse the 2026/27 priorities Engagement Report (Appendix 2) and the proposed Communication and Engagement Plan that will support the launch of the priorities for the year internally and externally (Appendix 4).
- d. **Assurance** – That there is alignment with strategic priorities set out in NHS Grampian’s 2026/27 plan with other system partner plans (Appendix 5).
- e. **Endorsement for Future Reporting** – Note that it is proposed that the quarterly ‘How Are We Doing (HAWD) Report’ will provide overarching assurance to the Board on performance against the Key Performance Indicators for the five strategic priorities, along with the provision of more detailed updates to the Board by each of the Programme Boards overseeing the delivery of these priorities.

This report relates to:

- NHS Grampian Strategy: Plan for the Future – People, Places, Pathways
- Board Annual Delivery Plan

This aligns to the following NHS Scotland quality ambition(s):

- Safe
- Effective
- Person Centred

This subject matter of this report is relevant to the mitigation of the following strategic risks (further information provided in the Risk section):

- Inability to meet population demand for Planned Care
- Significant delays in the delivery of Unscheduled Care
- Inability to affectively maintain and invest in NHS Grampian's infrastructure
- Deviation from recognised service standards of practice and delivery
- Inability to achieve the aspirations set out in Plan for the Future due to financial resource constraints and inefficiencies
- Inability to effectively engage citizens to shape service improvement and transformation
- Insufficient change and innovation to create a system which can meet demand and deliver on our strategic intent
- Deteriorating Workforce Engagement
- Worsening health in Grampian particularly in those who experience multiple disadvantages.

2 Report summary

2.1 Situation

This paper details the proposed strategic priorities for 2026/27 for NHS Grampian, for Board approval. They have been informed and shaped by internal and external engagement between January and March 2026.

The paper provides the context for these priorities, demonstrates alignment with Scottish Government, Sub National and system partner priorities and includes the main feedback themes from the engagement activity. The paper sets out the proposed plan for extensive internal and external communications to launch and share regular progress updates and mechanisms for embedding, monitoring, reporting and governance arrangements for the proposed strategic priorities as part of the organisation's and Board business to ensure adequate assurance on delivery.

2.2 Background

In December 2024, the Board confirmed that the direction set out in the Plan for the Future remained appropriate and extended the timeline for delivery to 2032. The Plan for the Future sets out our strategic direction but requires to be set in the current context (including Sub National and national planning and policy contexts) and with a much clearer underpinning annual delivery plan that year-on-year moves us towards realising the vision set out in Plan for the Future.

Linked to this, staff have also advised that there needs to be greater clarity on organisational priorities, and this was reinforced further by the External Diagnostic Review Report (published October 2025) which we are now responding to. Having three clear priorities (Value and Sustainability; Planned Care; Unscheduled Care) in 2025/26 has served us well and has supported our progress, ensuring both focus and improved delivery.

The priorities for 2026/27 seek to build on this approach, whilst responding to the wider context and requirements of NHS Grampian. A number of factors continue to influence a changing operating landscape for NHS Grampian which our strategic intent requires us to reflect and respond to. These are:

- **NHS Scotland Renewal Policy and Sub National Planning changes** – NHS Scotland published key documents in 2025 (Operational Improvement Plan (initially for 2025/26 with a refreshed version for 2026/27 with fewer priorities – Annual Operational Priorities – see Appendix 1), Service Renewal Framework and the Population Health Framework) which set out the short, medium and longer-term priorities for ensuring sustainable and equitable health and care in Scotland. A key enabler to successfully delivering the vision is effective collaboration across health and social care focussing on prevention, people-led care, care delivered in community/local as possible and improving care through digital technologies. This has been further reiterated by the Director's Letters DL (2024)31 - A Renewed Approach to Population Based Planning Across NHS Scotland and DL(2025)25 – Implementation of Sub National Planning: Co-Operation and Planning Directions 2025, and the Population Health Framework Supporting Sector Summaries.
- **Board's Escalation to Level 4** – A key objective of the Grampian NHS Board is to achieve de-escalation as soon as possible in a way that is sustainable. This requires continued focus during 2026/27, ensuring successful delivery of the Improvement Plan in response to the External Diagnostic Review.
- **Stabilising NHS Grampian** – The Board agreed to prioritise stabilising the system in relation to performance focusing on three organisation-wide priorities in 2025/26 (unscheduled care, planned care and financial performance) and progressing key recommendations in response to the External Diagnostic Report to provide the necessary assurance to staff, the Grampian population and Scottish Government. It is recognised that achieving stabilisation and improvement on aspects such as unscheduled and planned care and financial balance requires a high level of collaboration and support from the Integration Joint Boards (IJB), and other NHS partners, including other Health Boards in Scotland.

The External Diagnostic Review Report, Scottish Government Chaired Assurance Board and Auditor General's Section 22 Report – have all detailed that NHS Grampian will not be able to achieve medium-term financial sustainability and return to financial balance without significant system redesign and a focus on

transformation or change to funding levels – and as such, we must balance our focus on achieving stability whilst beginning our path to redesigning the health and care system, responding to this very clear conclusion.

- **Integrated service and financial planning** – System-wide integrated planning meetings took place on 7 November 2025 and 13 February 2026 to ensure more join up across the system. One of the actions agreed was to refresh the Terms of Reference for the North-East Transformation Group, so that Grampian-wide transformation opportunities can be agreed, prioritised and delivered through this group which will be chaired by the NHS Grampian CEO. The first meeting of this group will take place on 20 March 2026.

Approach to Developing the NHS Grampian Priorities for 2026/27

A number of factors and key principles have informed our approach to developing the strategic priorities for 2026/27. These are:

- Engaging and listening to patients, staff, the public/communities and partners about what is important and what matters most;
- Building on the positive progress that has been achieved during 2025/26 against the three priorities of unscheduled care, planned care and value and sustainability and the NHS Grampian Improvement Plan;
- Using data and intelligence to ensure a clear focus on delivering improved experience and outcomes;
- Ensuring the priorities are consistent with NHS Grampian's 'Plan for the Future' and national strategic direction and policy;
- Ensuring clarity around areas for enhancing joined-up working and collaboration with partners to focus on improvement outcomes for the population.

2.3 Assessment

Key Messages and Themes from Engagement

As part of developing NHS Grampian's 2026/27 Priorities for Delivery, we wanted to share the emerging priorities with our staff, partners and communities to help shape the final version. The proposed priorities and actions were shared with key stakeholders at an early stage to promote discussion, understanding, ownership and gather feedback.

The feedback received from our engagement sessions are detailed in Appendix 2.

i. Summary of Key Messages from Staff Groups

On the whole, for staff, it was felt that the proposed priority areas were the most important areas to focus upon. However, there were a number of areas highlighted, as summarised overleaf.

'From a workforce perspective, what matters most is psychological safety, realistic workload assignment and clarity of contribution. Staff want to see how priorities translate into practical support' - feedback from a member of NHS Grampian staff

What needs more focus?	What matters most?	Communication & engagement
<ul style="list-style-type: none"> • Primary Care • Mental Health • Children's Services • Digital • Infrastructure • Impact of climate change 	<ul style="list-style-type: none"> • Clear actions and measures everyone can understand • Staff health and wellbeing addressed in a meaningful way • Prevention as an explicit priority • Strengthened focus on pathways and transformation • Joined-up partnership working 	<ul style="list-style-type: none"> • Services need hope for the future: move out of Level 4, autonomy, budgetary control, clinically led service planning, make NHS Grampian an attractive place to work • Be explicit about what will be different • Explain how we are working with our partners • More opportunities for broader staff involvement

ii. Summary of Key Messages from Community Members

Conversations with community members across Aberdeenshire, Aberdeen and Moray also took place, with full details in Appendix 2.

We heard from community members that they were interested to hear about plans for improvement around a range of topics, some within the priorities which need to be strengthened and others, such as General Practice access, which are outwith our plans but included in wider system plans. What we heard consistently from community members is the need for honest two-way communication, regular updates, and stronger involvement so diverse voices are heard and considered in the plans.

This rich feedback has been used to inform the NHS Grampian Strategic Priorities for 2026/27 Communication and Engagement Plan which is contained in Appendix 4.

A summary of the key themes from the community sessions are outlined below.

What needs more focus?	What matters most?	Communication & engagement
<ul style="list-style-type: none"> • General Practice access • Clear practical plans • System wide communication • Mental health • Rural equity • Co-ordination of care • Prevention focused partnerships • Confidence that plans will prioritise safety and be person centred 	<ul style="list-style-type: none"> • Feeling listened to • Fair, consistent services • Safe, person centred services • Care near home • Connected pathways • Shorter waits • Genuine partnerships • Honesty, transparency & trust 	<ul style="list-style-type: none"> • Honest two-way communication • Clear regular updates • Multi-channel engagement • Simple, shareable materials • Stronger involvement structures (Patient Participation Groups (PPGs), Community Councils, local groups, etc.) • Reach out to hear diverse voices

'The more patients are involved in the process and understand the process, I think it would be a little bit easier. It won't solve everything, but I think that needs to be part of your plan as well' - feedback from a member of the public at a recent community conversation

Strategic Priorities for 2026/27

During 2026/27, we will continue to focus and make progress on our current three priorities; improving access to urgent and unscheduled care; reducing waiting times for planned care and moving towards financial balance. In addition to this, we know we also need to strengthen our leadership and culture (specifically focusing on joint decision-making, team working and supporting our staff), collaborative working with our partners around shared goals and have a greater focus on moving forward with redesign and transformation to ensure sustainable care and services. The five proposed strategic priorities for 2026/27 are summarised below.

1. **People, Leadership and Governance** - Improve staff experience and wellbeing so colleagues feel valued, supported and able to deliver high-quality care.
2. **Prevention** - Reduce health inequities, prevent or mitigate the health conditions which cause the greatest burden of disease, and reduce the future burden of demand for hospital care.
3. **Planned Care** - Further improve waiting times for planned care (operations, outpatient appointments, tests and scans) and cancer care.
4. **Urgent and Unscheduled Care** - Improve the timeliness of, and access to, urgent and emergency care for our patients.
5. **Value and Sustainability** - Reduce the in-year financial gap by £40m, to a deficit of no more than £36m, through the delivery of sustainable, cash-releasing, recurring savings across the organisation.

In order to articulate NHS Grampian's priorities for 2026/27, a staff and public-facing document has been produced (contained within Appendix 3) which provides the context and background for the organisation's focus on these five priorities, along with the key actions and the Key Performance Indicators/metrics which will help us track and demonstrate progress.

Although the actions and Key Performance Indicators aligned to each of the five priorities are focused on delivery for 2026/27, this is a step in the improvement journey to support the ambition and strategic intent over the medium to longer term. In order to ensure there is greater clarity on how we achieve the ambitions set out in the Plan for the Future by 2032, work will be undertaken in autumn 2026 to refresh the Plan for the Future and better articulate the journey to deliver this over the coming years and the key areas of transformation required.

Enablers for Transformation

During 2026/27, we propose to progress the following enabling actions for transformation. These build on activities and projects that have already been funded and will provide the building blocks for stepping towards the transformation that is required to deliver against the Scottish Government Service Renewal and Population Health Frameworks.

Redesign:

- Take forward whole system redesign, prioritising the following pathways – Functional Conditions (examples include functional neurological disorder, fibromyalgia and irritable bowel syndrome) and Neurodevelopment.
- Contribute to the delivery of the Scotland East Plan (Sub National arrangements) to reduce unwarranted variation in access, performance and outcomes for Emergency Healthcare, improve inpatient orthopaedic waiting times and roll-out business systems.
- Take a strategic approach to Community Appointment Days (and other community led models) aligned to clinical pathways where this will improve outcomes and experience.
- Deliver the pan-Grampian Walk-In Centre pilot and General Practice Teaching Hub.

Digitisation:

- Enable patients to access their own health and social care information via MyCare.scot.
- Enable staff to spend time where it counts through automated discharge documents.
- Enable a shift from hospital to community via improved remote-monitoring technologies.

Infrastructure:

- To open the ANCHOR facilities (planned for July 2026) and the Baird Family Hospital (planned for June 2027) for our patients, communities and staff, and ensure there is learning from which the NHS in Scotland, including NHS Grampian, can benefit from.
- Submission of three priorities to Scottish Government for consideration for future infrastructure development.
- Meet our legislative requirement to deliver a net zero carbon service across our infrastructure, requiring emphasis not just on buildings but on the way we contribute towards a circular economy – reducing, reusing and recycling.

Partnerships:

- Progress Grampian-wide actions agreed with the North-East Transformation Group to maximise opportunities to optimise efficiencies, improvements to pathways and services that will benefit the communities we serve.
- Take a strategic whole system approach to priority areas through our contribution to Health and Social Care Partnerships, Alcohol and Drug Partnerships and Community Planning Partnerships (healthy weight, poverty, mental health, preventing and reducing harm from drugs, alcohol and gambling, children and young people).
- Strengthen relationships with our range of partners, including:
 - third sector and services to deliver preventative models of care; and
 - with Healthcare Improvement Scotland and NHS Education for Scotland.

Alignment with Scottish Government Priorities

On 24 February 2026, the Chief Operating Officer and Deputy Chief Executive for NHS Scotland wrote to Chief Executives in NHS Boards, confirming the high-level operational priorities for NHS Scotland for 2026/27 (Annual Operational Priorities). Please see Appendix 1. We have reviewed the proposed NHS Grampian priorities against the national priorities and can confirm that there is full alignment of these with the NHS Scotland high-level operational priorities and the direction set out in the Service Renewal and Population Health Frameworks.

Delivery of the Priorities for 2026/27

These strategic priorities for 2026/27 set out how we will build on the progress during 2025/26 to continue towards achieving stabilisation of operational performance and further improve care, services, experience of patients and staff working in NHS Grampian.

Successful delivery of many of these priorities is dependent on successful joint working and collaboration with staff, the public, communities and our partners in the North-East and across Scotland.

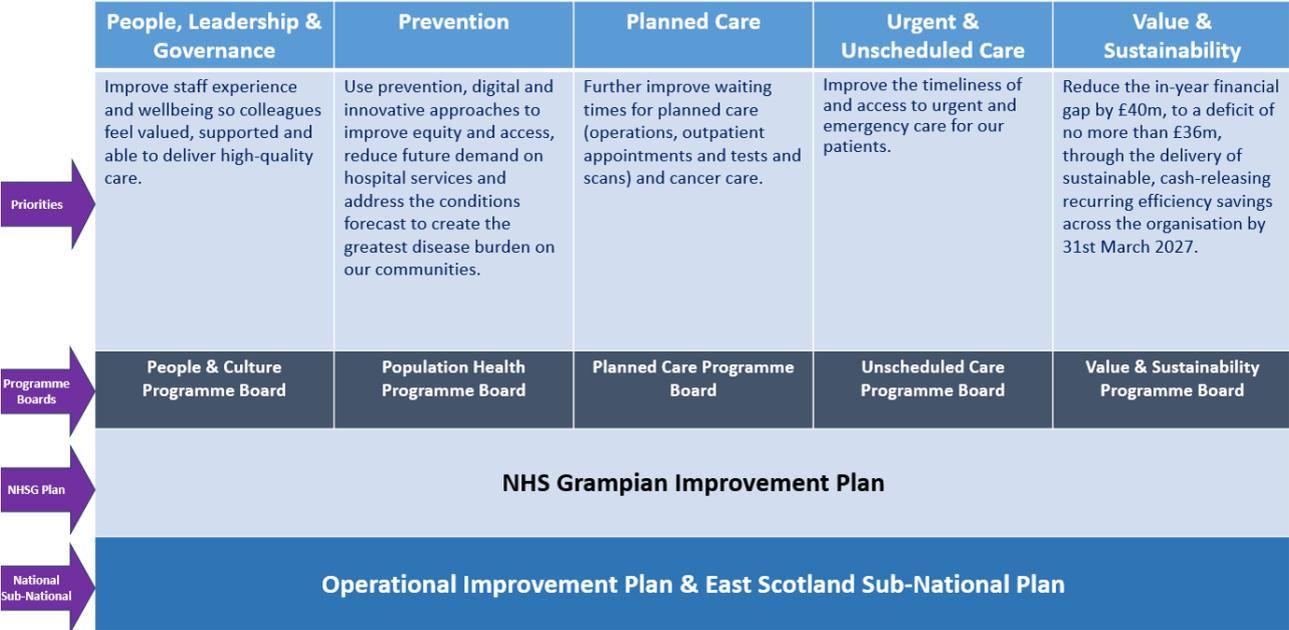
Delivery of each of the five priorities will be overseen by a dedicated Programme Board which will have a clear delivery plan and will operate within the agreed governance framework, with clear reporting and escalation routes in place. These Programme Boards will strengthen collaboration and join-up across the system and ensure appropriate engagement and involvement and regular communication updates at local, Sub National and national level. These Programme Boards will report to the Executive Team and provide assurance to the Board through the appropriate Committees of the Board.

To further enhance this arrangement, each strategic priority has a named member of the Executive Team responsible for the assurance reporting of the priority via the Programme Board structure and committees as appropriate. The table below sets this out.

Strategic Priority	Lead for Assurance Reporting
People, Leadership and Governance	Melanie Saunders, Interim Director of People and Culture
Prevention	Shantini Paranjothy, Director of Public Health
Planned Care	Geraldine Fraser, Chief Officer for Acute
Urgent and Unscheduled Care	Leigh Jolly, Chief Officer for Aberdeenshire Integration Joint Board
Value and Sustainability	Alex Stephen, Director of Finance

The diagram below illustrates at a high level the oversight of each of the strategic priorities by a dedicated Programme Board and that these are aligned to the NHS Grampian Improvement Plan and the national and Sub National operational priorities.

NHS Grampian 2026/27 Priorities for Delivery



Reporting Arrangements and Frequency

It is proposed that progress against all five strategic priorities for 2026/27 will be reported to the Board through the NHS Grampian “How Are We Doing” (HAWD) Board Performance Report. The HAWD Report will be revised to reflect the agreed Key Performance Indicators which supports evidencing delivery of the five priorities. The Board will see the first progress report for quarter 1 (April-June 2026) performance against the 2026/27 priorities at the public Board meeting in August 2026.

The HAWD Report is the principal reporting mechanism within the organisation's approved Integrated Performance Assurance and Reporting Framework (IPARF), which supports consistent and transparent performance assurance. The HAWD Report will be produced on a quarterly basis for review by the Executive Team, and for onward assurance through the Performance Assurance, Finance and Infrastructure Committee (PAFIC), before submission to the NHS Grampian Board.

Regular operational performance reviews of the priorities with the Executive Team and commissioned thematic deep-dives, where required, will supplement this cycle. Progress will also be monitored through the respective Programme Boards and organisation's wider governance structures to ensure system-wide alignment and performance.

Resource for Delivering the 2026/27 Priorities and Enabling Actions

Delivery against these strategic priorities and enabling actions will utilise existing resource and capacity within the organisation. Work is underway, led by the Interim Director of Improvement, to align existing project management and programme resource with the strategic priorities and enabling actions set out in this paper, and this exercise will be concluded by 31 March 2026.

Launch and Communications Plan

A Strategic Priorities 2026/27 Communication and Engagement Plan (Appendix 4) has been developed which seeks to build upon and embed activity undertaken over the past six months and present the priorities as a continuation of an existing direction of travel, rather than something new that will require additional resource or capacity. Activity will commence with a launch phase from April 2026 seeking to inform audiences, followed by further opportunities for engagement as work for each priority progresses. A range of channels will be used to ensure wide reach and encourage participation. The key themes underpinning our messages will be:

- Our 2026/27 priorities set out what we need to focus on to stabilise services now and build a stronger, more sustainable system for the future.
- We aim to be open and transparent and show steady progress, with clear measures so people can see what's improving and where challenges remain (and where they do, what we are doing to respond to and address them).
- Preventing ill health, improving access to care, supporting our staff and working with partners are key to delivering better outcomes.
- We want to listen and work with staff, partners and communities so our actions reflect what matters most to people.
- To transform health and care in 2026/27, we will strengthen our partnerships across the public sector, the third sector and our communities.

Alignment with Health and Social Care Partnership Strategic Plans and Local Outcome Improvement Plans

There is high level alignment between the proposed NHS Grampian strategic priorities for 2026/27 and the priorities set out in the strategic plans for the three Health and Social Care Partnerships, and the Community Planning Partnership (CPP) Local Outcome Improvement Plans in Aberdeen City, Aberdeenshire and Moray. This is illustrated in Appendix 5.

During 2026/27, we will work to further map the detail of our common outcome measures across NHS Grampian and IJBs to see how our actions complement each other to achieve our respective goals.

2.3.1 Quality/Patient Care

A key principle and focus of the proposed strategic priorities are designed to support with ensuring delivery of the highest standards quality and patient care and outcomes in NHS Grampian. Key Performance Indicators will assist in evidencing that intended improvements are being achieved.

It is anticipated that implementation of actions to strengthen leadership and governance in the acute sector, along with a greater focus on prevention, early intervention and collaboration with our partners will lead to a positive impact on quality and patient care outcomes.

2.3.2 Workforce

We know levels of staff engagement and how they feel about working in an organisation which listens, responds and empowers staff has a correlation with attracting people to come to work in the organisation, retention of staff, levels of bottom up change and innovation and staff health and wellbeing/sickness absence.

Strategic priority 1, focuses on improving staff experience, health and wellbeing, greater engagement and ensuring staff are empowered in terms of decision-making. Oversight for progress against this priority will sit with the Culture and Leadership Programme Board.

2.3.3 Financial

Progressing financial sustainability and balance in relation to prevention, clinical performance and staff governance remains a key priority for 2026/27. The oversight of delivery of the financial savings will remain with the Value and Sustainability Programme Board.

This will be aligned closely with the redesign and transformation work to ensure sustainability in both the short and longer term, including affordability and best value.

2.3.4 Risk Assessment / Management

The agreement and maintaining focus on a clear set of priorities is a key action for managing Strategic Risk 3006 (Change and Innovation), along with a number of other organisational strategic risks, supported by ongoing monitoring of progress and early escalation where delivery or impact is at risk.

Many of the actions within the strategic priorities focus on reducing known risks to the organisation.

2.3.5 Equality and Diversity, Including Health Inequalities

Delivery of the changes required to progress aspects of each priority will require leads to ensure impact assessments are undertaken in line with statutory duties wherever necessary. This detail will be contained within the individual programme plans and NHS Grampian's Integrated Impact Assessments process is in place to support teams and services to ensure change is cognisant of equality, health inequality, and socioeconomic impacts.

2.3.6 Other Impacts

Not applicable.

2.3.7 Communication, Involvement, Engagement and Consultation

As set out in Appendix 2, the Board has involved and engaged both internal and external stakeholders on the development of the priorities for 2026/27. During the period January and March 2026, key groups engaged were:

Internal:

- All Staff dedicated session for 2026/27 Priorities
- All Staff briefing
- NHS Grampian Board
- NHS Grampian System Leaders
- NHS Grampian Area Clinical Forum
- NHS Grampian Area Partnership Forum

External:

- NHS Grampian Public Involvement Network
- Third Sector Interface (TSI) CEOs
- Aberdeen City Community Conversation
- Aberdeenshire Community Conversation
- Moray Community Conversation
- Aberdeenshire Tackling Poverty and Inequalities Group

The feedback received from the engagement sessions has informed and shaped the development of the priorities and the proposed Communication and Engagement Plan.

During the community engagement sessions, feedback, concerns and suggestions were highlighted, for example, access to general practice and mental health services. This feedback has been shared with relevant teams to consider and respond to and will inform further improvement and transformation work as appropriate.

What came through clearly was a need to strengthen communication and engagement with communities to build trust and confidence in the changes which are planned and to create two-way dialogue so people and communities have more opportunities to shape plans in 2026 and beyond.

All participants in the Community Conversations were invited to register to receive updates on progress via the Public Involvement Team and many have chosen to do this. Debrief sessions have also taken place with leads in Health and Social Care Partnerships who supported the sessions to learn and evolve how we collaborate across the system around engagement activities in this next year.

Engagement with IJBs and Community Planning Boards are in progress at time of writing this report.

2.3.8 Route to the Meeting

As set out above, the priorities have been widely engaged upon, and feedback received has informed the development of the priorities and the proposed communication and engagement plan. The proposed priorities for 2026/27 and the engagement plan have also been formally considered and were supported by the following committees and groups prior to the submission to the Board.

- Joint Area Clinical Forum and Grampian Area Partnership Forum – 3 March 2026
- Wider System Leadership Group – 4 March 2026
- Non-Executive Board Members Session - 4 March 2026
- NHS Grampian Chief Executive Team – 03 March 2026

At the time of submitting the report, engagement on the proposed priorities is also being scheduled to take place during March 2026 with the following groups:

- Aberdeenshire Integration Joint Board
- North-East Transformation Group
- North-East Strategic Partnership Group
- Aberdeen City Community Planning Board
- Aberdeenshire Community Planning Board
- Moray Community Planning Board

2.4 Recommendations

The Board is asked to:

- a. **Decision** – Approve NHS Grampian’s proposed priorities for 2026/27 as set out in the public/staff facing document (Appendix 3).
- b. **Assurance** – Review and scrutinise the information provided in the paper and confirm that it provides assurance that the proposed priorities for NHS Grampian for 2026/27 are in line with national policy and emerging Sub National arrangements and Scottish Government priorities set out for the year ahead which were communicated to Health Boards in February 2026 (Appendix 1).
- c. **Endorsement** – Endorse the 2026/27 priorities Engagement Report (Appendix 2) and the proposed Communication and Engagement Plan that will support the launch of the priorities for the year internally and externally (Appendix 4).
- d. **Assurance** – That there is alignment with strategic priorities set out in NHS Grampian’s 2026/27 plan with other system partner plans (Appendix 5).
- e. **Endorsement for Future Reporting** – Note that it is proposed that the quarterly ‘How Are We Doing (HAWD) Report’ will provide overarching assurance to the Board on performance against the Key Performance Indicators for the five strategic priorities, along with the provision of more detailed updates to the Board by each of the Programme Boards overseeing the delivery of the strategic priorities.

3 List of Appendices

The following appendices are included with this report:

- Appendix 1 – Letter from NHS Scotland Chief Operating Officer –
Annual Organisational Priorities 2026-27 (February 2026)
- Appendix 2 – NHS Grampian 2026/27 Priorities for Delivery ~ Engagement Report
(January – March 2026)
- Appendix 3 – NHS Grampian 2026/27 Priorities for Delivery
- Appendix 4 – NHS Grampian Strategic Priorities 2026/27 Communication and
Engagement Plan
- Appendix 5 – Alignment of NHS Grampian Priorities with Health and Social Care
Partnership and Community Planning Board Plans

Appendix 1 - Letter from NHS Scotland Chief Operating Officer – Annual Organisational Priorities 2026/27 (February 2026)

Chief Operating Officer & Deputy Chief Executive,
NHS Scotland

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Scottish Government
Riaghaltas na h-Alba
gov.scot

To: NHS Board Chief Executives
CC: National Board Chief Executives

24 February 2026

Dear colleagues

2026/27 Operational Priorities

INTRODUCTION

Thank you for your continued leadership during what remains a challenging period for services across NHS Scotland. As we move into 2026/27, it is important that Boards have a clear and coherent operational steer for the coming year, while we avoid setting out detailed commitments given the timing within the parliamentary cycle.

From the outset, I want to acknowledge the clear progress achieved across Scotland's NHS since the pandemic and particularly in the last year. We have seen the waits over 52 weeks reducing by 40.1% and 23.9% for NOP and TTG respectively since July 2025. This has been driven by the exceptional work of colleagues across the system and thanks to a more joined-up approach to maximising capacity. I am deeply grateful for these efforts.

A continued focus on maximising system capacity across national, sub-national and community settings will remain central to sustaining this progress into 2026/27.

This year, we are taking a streamlined approach, setting out the minimum operational expectations for 2026/27. These are intended to provide clarity and focus, without duplicating the more detailed work underway across the system. Delivery of these priorities must continue to be underpinned by safe, effective and person centred care, supported by established clinical governance, quality assurance and improvement arrangements.

Operational detail, including trajectories, service-level expectations and programme activity, will continue through existing planning, commissioning and performance arrangements.

STRATEGIC CONTEXT

These Annual Operational Priorities (AOPs) sit within the strategic direction set by the Service Renewal Framework (SRF) and Population Health Framework (PHF). Both support the shift towards prevention and more community-based care, while addressing sustainability and inequalities.

They are also consistent with the wider ambition to enhance community and primary care capacity, including through the New Deal for General Practice, as part of the system-wide shift towards prevention and earlier intervention.

The AOPs do not restate SRF and PHF actions. Instead, they provide a concise operational focus for 2026/27, aligned with that strategic intent.

A wide range of programme activity continues through SRF and PHF governance, including prevention, long term conditions, primary and community care, mental health, workforce modernisation and broader service redesign. This includes maturity assessment work on becoming a population health organisation, CVD risk management, frailty and the Primary Care and Community Health Route Map with significant additional investment in GP services.

System-wide financial sustainability and workforce modernisation also remain core components of the SRF, with further detail developing over the year.

DRAFT OPERATIONAL PRIORITIES FOR 2026/27

These priorities provide the high-level operational focus for the year ahead.

1. Reduce the longest waits for planned care

Further increase productivity and efficiency across planned care to create additional capacity, maintain progress, and continue reducing the longest waits while ensuring clinical prioritisation is preserved. Boards should maintain or where, possible, improve activity levels and removals.

Boards should maximise all available elective capacity, including National Treatment Centres, sub-national arrangements, local theatres, and community-based options where appropriate, supported by improved scheduling and theatre utilisation tools.

Cancer diagnostics and treatment must be prioritised within this, boards should have a clear focus on improving the 62 day standard performance while reducing cancer treatment backlogs.

2. Increase productivity across elective and diagnostic services

Optimise the use of national, sub national and Board diagnostic and elective capacity to improve throughput and support timely diagnosis and treatment. This includes strengthening community-based diagnostic access and accelerating interoperable diagnostic and digital infrastructure.

3. Improve flow and performance in unscheduled care

Through subnational and local redesign develop sustainable urgent and emergency care systems that minimise delays, including system flow-based alternatives to admission. This includes Walk-in Centre testing in participating areas, zero-day length of stay and short stay pathways.

Improve occupancy by optimising discharge pathways through 7-day working and integrated discharge teams, supported by responsive community capacity to avoid unnecessary admission and support discharge without any delay.

Ensure people are seen at the right place, at the right time, including via increasing pathways available to Flow Navigation Centres and community-based alternatives. Detailed guidance will be issued separately to support local improvement plans, with sub-national arrangements supporting system flow and pathway redesign.

4. Expand Hospital at Home as a mainstream model of care

Prioritise expansion, utilisation and consistency of Hospital at Home and alternatives to acute hospital services, reducing variation and enabling more people to receive safe, effective care in the community. Sub-national arrangements should support spread and consistency where appropriate.

5. Support safe and high-quality maternity and neonatal services

Ensure full implementation of HIS Maternity Services inspection actions and deliver the required changes to implement the new networked neonatal intensive care model, so that mothers and babies receive safe, high-quality care in the right place at the right time.

6. Improve support and services around Mental Health, Neurodiversity and Learning Disability

Continue stabilising and improving access for all ages through locally agreed plans and improve access to neurodevelopmental supports and assessments. Strengthen pathways and support across wider mental health services in collaboration with local and national partners, including community-based supports.

7. Accelerate digital access and modernisation

Improve access, communication and care coordination through continued rollout of MyCare.scot and wider digital improvements across hospital, community and primary care, supported through national and sub-national programmes.

8. Become a population health organisation

Using the population health maturity matrix, undertake an assessment and produce a resultant action plan.

DELIVERING THE PRIORITIES

Delivery of these priorities will continue through the established planning and performance systems.

Maximising capacity across national, sub-national and local settings, including theatres, diagnostics and community-based provision, will continue to be taken forward through these arrangements. Further detail on planned care will follow through existing planning channels.

Boards should reflect these priorities in their planning and performance discussions for 2026/27.

Your continued leadership remains essential as we work together to deliver safe, effective and sustainable services for the people of Scotland.

Yours sincerely



Christine McLaughlin

Chief Operating Officer & Deputy Chief Executive, NHS Scotland